## FEC FORM 2

## STATEMENT OF CANDIDACY

1	(a) Name of Condidate (in full)										
١.	(a) Name of Candidate (in full) Foxx, Virginia, Ann, ,										
	(b) Address (number and street)	☐ Check if address changed			2. Candidate's FEC Ide	entification Number					
	PO Box 2676	□ Oncok ii aa	arcoo oriari	jou	H4NC05146	Situlo autori i varibor					
	(c) City, State, and ZIP Code				+	New Amended					
	Boone		NC 2	8607		N) OR X (A)					
4.	Party Affiliation	5. Office Sought		6. State & Dist	rict of Candidate						
	REPUBLICAN PARTY	House		NC	11						
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 (year of election)										
	NOTE: This designation should be	filed with the appropriate	office listed	in the instructions.							
	(a) Name of Committee (in full)										
	Virginia Foxx for Co	ngress									
	(b) Address (number and street) PO Box 2676										
	(c) City, State, and ZIP Code										
	Boone			NC	28607						
	DE	SIGNATION OF ( Including)		AUTHORIZED  ising Representativ							
Q	I hereby authorize the following nan	ned committee, which is	NOT my nrin	ncinal campaign con	nmittee to receive and e	vnend funds on hehalf of my					
0.	candidacy.	med dominintee, winding	to i my pm	loipai dampaigir doi	minico, to receive and e	Apona ranas on bonan or my					
	NOTE: This designation should be to	iled with the principal car	npaign com	mittee.							
	(a) Name of Committee (in full)										
	(b) Address (number and street)										
	(c) City, State, and ZIP Code										
	(b) Oity, Otate, and Zii Gode										
	I cortify that I have eva	nmined this Statement an	d to the has	t of my knowledge a	and helief it is true correc	t and complete					
٥.	<u> </u>	Thined this otalement an				and complete.					
Signature of Candidate					Date	•					
Fo	oxx, Virginia, Ann, ,		[]	Electronically Filed]	11/08/2021						
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											
NC	OTE: Submission of false, erroneous	, or incomplete information	on may subje	ect the person signir	ng this Statement to pena	alties of 2 U.S.C. §437g.					
NC	OTE: Submission of false, erroneous	, or incomplete information	on may subje	ect the person signir	ng this Statement to pena	alties of 2 U.S.C. §437g.					
NC	OTE: Submission of false, erroneous	, or incomplete information	on may subje	ect the person signir	ng this Statement to pena	alties of 2 U.S.C. §437g.					

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

## Optional Supplemental Page for Designation of Additional Authorized Committees

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## **DESIGNATION OF OTHER AUTHORIZED COMMITTEES**(Including Joint Fundraising Representatives)

	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.									
	(a) Name of Committee (in full)  Foxx Victory Federal Committee									
	(b) Address (number and street) 1909 K Street, NW 12th Floor									
	(c) City, State, and ZIP Code									
	Washington DC 20006									
	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.									
	(a) Name of Committee (in full)	•								
	(b) Address (number and street)	-								
	(c) City, State, and ZIP Code	-								
<ol> <li>I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf candidacy. NOTE: This designation should be filed with the principal campaign committee.</li> <li>(a) Name of Committee (in full)</li> </ol>										
	(b) Address (number and street)									
	(c) City, State, and ZIP Code	-								
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.									
	(a) Name of Committee (in full)									
	(b) Address (number and street)	-								
	(c) City, State, and ZIP Code									